## -FILING DATE SERIAL NO. 10/08/319 APPLIQUITIES **CLAIMS ONLY** CLAIMS AFTER 1st AMENDMENT DEP. OEP. MD. DEP. DEP. DED. IND. DEP. MD. DEP. MD. BED. .5 - 14 Ŧ TOTAL IND. TOTAL DEP. TOTAL CLAIMS TOTAL IND. **\_1** ... ... ,l

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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